CHOYCE DISTRIBUTION, INC.

3140 Ualena Street, Suite 206 Honolulu, Hawaii 96819 Telephone No. (808) 839-1502 Facsimile No. (808) 839-1501

(Must be completely filled out, otherwise application will not be processed)

TO:	Choyce Distribution, Ir	IC.	DATE:		
	wing information is submit ner than cash to the under		and upon which you may rely sho	ould you decide to make sales on	
Applicant	<u>t</u>				
Name of	account (trade name):				
Billing Ad	ddress:	· · · · · · · · · · · · · · · · · · ·			
Business	Phone:	_ Fax No.:	Date business started:		
Type of E	Business:				
Federal I	.D. No.:			- · · · · · · · · · · · · · · · · · · ·	
Name of	Responsible Managing E	nployee:	·		
We opera	ate as a: Corporation	□ Partnership □ Limite	ed Partnership 🏻 Individual		
			Address		
Name of	Bank:	Branch/Add	ress:		
Bank Acc	count No.:				
CREDIT	REFERENCES				
Company Contact		Street Addre	ess p Code		
CompanyContact		Street Addre City/State/Zi	Street Address		
Company Contact		Street Addre			
Company Contact		Street Addre			

ORDERING INFORMATION
Are Written Purchase Orders Required?YesNo Is Merchandise for Resale?YesNo
The undersigned agree that this request for credit, if approved and credit is extended, shall be subject to the following terms and conditions:
 I (we) shall pay the amount or amounts due in full as evidenced by the invoice(s), not later than thirty (30) days following the last day of the month in which the indebtedness was incurred. I (we) agree that any amounts not paid within the time allowed in paragraph 1 above shall be considered delinquent and shall bear interest at the rate of one and one-half percent (1-1/2%) per month or eighteen percent (18%) per annum. In the event that a delinquent account is referred for collection to an agency or attorney, I (we) agree to pay in addition to the amount of said account all costs of collection including a reasonable attorney's fee. A fee of \$25.00 will be assessed on all returned checks. UNDERSTOOD THAT THIS STATEMENT IS GIVEN TO INDUCE YOU TO EXTEND CREDIT TO THE
UNDERSIGNED AND THAT YOU WILL, IN FACT, RELY UPON SAID STATEMENT IF YOU EXTEND CREDIT. THE UNDERSIGNED CERTIFIES THAT CHOYCE DISTRIBUTION, INC. MAY OBTAIN A CREDIT REPORT FOR USE IN CONNECTION WITH THIS APPLICATION FOR CREDIT AND FURTHER CERTIFIES THAT THE APPLICATION RELATES TO CREDIT FOR COMMERCIAL PURPOSES AND NOT FOR PERSONAL FAMILY OR HOUSEHOLD PURPOSES NOR FOR EMPLOYMENT PURPOSES.
APPLICATION (NAME OF ACCOUNT)
By: By: Title
GUARANTY In consideration of your extending credit to the foregoing applicant, the undersigned jointly and severally guarantee the payment promptly when due of all obligations of said applicant to you. We waive presentment and demand for payment, protest and notice of non-payment, and we subordinate to you any rights you may now or hereafter have against applicant and we waive notice of acceptance hereof. We consent that you may, without affecting our liability, compromise or release, and grant extensions of time of payment to applicant, and we consent to the transfer to you of security by applicant. We shall pay all attorney's fees and expenses of collection in the event of referral to any agency or attorney(s). This guaranty shall not be discharged or affected by death of any of the undersigned and shall bind our respective heirs, administrators, representatives, successors, and assigns.
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